Case 15-43522 Doc 1 Filed 12/29/15 Entered 12/29/15 18:13:39 Desc Main Document Page 1 of 56

12/29/15 6:11PM

| Fill in this information to identify your case: | | |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | ■ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

B 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Identify Yourself | | |
|----|---|--|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for | Kimberly First name | First name |
| | example, your driver's license or passport). | Middle name | Middle name |
| | Bring your picture identification to your meeting with the trustee. | Martin Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years Include your married or maiden names. | Kimberly Turner | |
| | maiden names. | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-2971 | |

Debtor 1 Kimberly Martin

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Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | |
|--|---|---|--|--|--|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | | ■ I have not used any business name or EINs. | ☐ I have not used any business name or EINs. | | |
| | Include trade names and doing business as names | Business name(s) | Business name(s) | | |
| | | EINs | EINs | | |
| 5. | Where you live | 3116 191st Place | If Debtor 2 lives at a different address: | | |
| | | Lansing, IL 60438 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | |
| | | Cook County | County | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | |
| 6. | Why you are choosing this district to file for | Check one: | Check one: | | |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | |
| | | | | | |

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Case number (if known) Debtor 1 Kimberly Martin

| Par | t 2: Tell the Court About | Your Bar | kruptcy C | ase | | | | |
|------------|--|---|------------------------------|---|--|--|-----|--|
| 7. | The chapter of the Bankruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | | |
| | choosing to file under | ■ Cha | pter 7 | | | | | |
| | | ☐ Cha | pter 11 | | | | | |
| | | ☐ Cha | pter 12 | | | | | |
| | | ☐ Cha | pter 13 | | | | | |
| | | | | | | | | |
| 3. | How you will pay the fee | — а | bout how yo | ou may pay. Typically, if r attorney is submitting y | you are paying the fee | eck with the clerk's office in your local court for more de yourself, you may pay with cash, cashier's check, or mother than the cash, your attorney may pay with a credit card or check that the cash card or car | ney | |
| | | | | y the fee in installment ee in Installments (Officia | callments. If you choose this option, sign and attach the <i>Application for Individuals to Pay</i> s (Official Form 103A). | | | |
| | | b th | ut is not red nat applies | quired to, waive your fee, to your family size and y | , and may do so only if you are unable to pay the | ion only if you are filing for Chapter 7. By law, a judge m your income is less than 150% of the official poverty line e fee in installments). If you choose this option, you mus d (Official Form 103B) and file it with your petition. | • | |
|) . | Have you filed for bankruptcy within the | ■ No. | | | | | | |
| | last 8 years? | ☐ Yes. | | | | | | |
| | | | District | | When | Case number | | |
| | | | District | | When | Case number | | |
| | | | District | | When | Case number | | |
| 10. | Are any bankruptcy | ■ No | | | | | | |
| | cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes. | | | | | | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if known | | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if known | | |
| 11. | Do you rent your | ■ No. | Go to | line 12. | | | | |
| | residence? | ☐ Yes. | Has y | our landlord obtained an | eviction judgment agai | nst you and do you want to stay in your residence? | | |
| | | | | No. Go to line 12. | | | | |
| | | | | Yes. Fill out <i>Initial State</i> bankruptcy petition. | ement About an Evictio | on Judgment Against You (Form 101A) and file it with this | 3 | |

| Debtor 1 | Kimberly Martin | Document | Page 4 of 56 Case number (if known) | 12/29/15 6:11PN |
|----------|-----------------|----------|-------------------------------------|-----------------|
| | | | | |

| Par | Report About Any Bu | sinesses | You Owi | n as a Sole Propriet | or | | |
|--|---|----------|--|---|---|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | | | |
| | | ☐ Yes. | Name | e and location of bus | iness | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | Name of business, if any | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numl | oer, Street, City, Star | te & ZIP Code | | |
| | it to this petition. | | Chec | k the appropriate bo | x to describe your business: | | |
| | | | | Health Care Busin | ness (as defined in 11 U.S.C. § 101(27A)) | | |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) | | |
| | | | | Stockbroker (as d | efined in 11 U.S.C. § 101(53A)) | | |
| | | | | Commodity Broke | r (as defined in 11 U.S.C. § 101(6)) | | |
| | | | | None of the above | | | |
| If you are filing under Chapter 11, the court must know whether you are a small business debtor so the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balar operations, cash-flow statement, and federal income tax return or if any of these documents do not exit in 11 U.S.C. 1116(1)(B). I am not filing under Chapter 11. | | | a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure | | | | |
| | For a definition of small | No. | | g | | | |
| | business debtor, see 11 U.S.C. § 101(51D). | ☐ No. | I am Code | | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy | | |
| | | ☐ Yes. | I am | filing under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | |
| Par | t 4: Report if You Own or | Have Any | / Hazard | ous Property or Any | y Property That Needs Immediate Attention | | |
| 14. | Do you own or have any | ■ No. | | | | | |
| | property that poses or is alleged to pose a threat of imminent and identifiable hazard to | ☐ Yes. | What is | the hazard? | | | |
| | public health or safety? Or do you own any property that needs immediate attention? | | | diate attention is , why is it needed? | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where i | s the property? | Number Street City State & Zin Code | | |
| | | | | | Number, Street, City, State & Zip Code | | |

Page 5 of 56 Document Case number (if known) Kimberly Martin Debtor 1

Explain Your Efforts to Receive a Briefing About Credit Counseling Part 5:

15. Tell the court whether you have received a briefing about credit

counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about П credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes

me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

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Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if anv.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| | I am not required to receive a briefing about credit |
|---|--|
| _ | counseling because of: |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

My physical disability causes me to Disability.

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty

in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Kimberly Martin

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Case number (if known)

| Par | 6: Answer These Questi | ons for Re | eporting Purposes | | | | | | |
|-----|--|--|--|--|---|--|--|--|--|
| 16. | What kind of debts do you have? | 16a. | Are your debts primarily consindividual primarily for a person | sumer debts? Consumer debts are dal, family, or household purpose." | defined in 11 U.S.C. § 101(8) as "incurred by an | | | | |
| | | | ☐ No. Go to line 16b. | | | | | | |
| | | | Yes. Go to line 17. | | | | | | |
| | | 16b. | Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. | | | | | | |
| | | | ☐ No. Go to line 16c. | | | | | | |
| | | | ☐ Yes. Go to line 17. | | | | | | |
| | | 16c. | State the type of debts you owe | e that are not consumer debts or busi | iness debts | | | | |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chapter 7. | Go to line 18. | | | | | |
| | Do you estimate that after any exempt property is excluded and | ■ Yes. | | you estimate that after any exempt pill be available to distribute to unsecu | property is excluded and administrative ured creditors? | | | | |
| | administrative expenses are paid that funds will | | □ No | | | | | | |
| | be available for distribution to unsecured creditors? | | ■ Yes | | | | | | |
| 18. | How many Creditors do | 1 -49 | | 1 ,000-5,000 | 25,001-50,000 | | | | |
| | you estimate that you owe? | □ 50-99 | | □ 5001-10,000 | 5 0,001-100,000 | | | | |
| | | □ 100-1 | | ☐ 10,001-25,000 | ☐ More than100,000 | | | | |
| | | 200-9 | 99 | | | | | | |
| 19. | How much do you | □ \$0 - \$ | 50.000 | ☐ \$1,000,001 - \$10 million | ☐ \$500,000,001 - \$1 billion | | | | |
| | estimate your assets to be worth? | | 01 - \$100,000 | □ \$10,000,001 - \$50 million | □ \$1,000,000,001 - \$10 billion | | | | |
| | be worth? | | 001 - \$500,000 | | ☐ \$10,000,000,001 - \$50 billion | | | | |
| | | \$500,0 | 001 - \$1 million | □ \$100,000,001 - \$500 million | ☐ More than \$50 billion | | | | |
| 20. | How much do you | □ \$0 - \$ | 50.000 | ☐ \$1,000,001 - \$10 million | ☐ \$500,000,001 - \$1 billion | | | | |
| | estimate your liabilities to be? | | 01 - \$100,000 | □ \$10,000,001 - \$50 million | □ \$1,000,000,001 - \$10 billion | | | | |
| | to be: | \$100 , | 001 - \$500,000 | ☐ \$50,000,001 - \$100 million | □ \$10,000,000,001 - \$50 billion | | | | |
| | | \$500, | 001 - \$1 million | □ \$100,000,001 - \$500 million | ☐ More than \$50 billion | | | | |
| Par | 7: Sign Below | | | | | | | | |
| For | you | I have ex | amined this petition, and I decla | re under penalty of perjury that the in | formation provided is true and correct. | | | | |
| | | | | | ble, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7. | | | | |
| | | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | | | | | |
| | | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | | | | | | | |
| | | bankrupto 1519, and | cy case can result in fines up to | | ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, | | | | |
| | | Kimberly | | Signature of De | btor 2 | | | | |
| | | Executed | December 29, 2015 MM / DD / YYYY | Executed on | MM / DD / YYYY | | | | |

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For your attorney, if you are represented by one

Debtor 1

Kimberly Martin

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Alexander P. Nohr | Date | December 29, 2015 |
|--|--------------|-----------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| | | |
| Alexander P. Nohr | | |
| Printed name | | |
| THE SEMRAD LAW FIRM, LLC | | |
| Firm name | | |
| 20 S. Clark Street | | |
| 28th Floor | | |
| Chicago, IL 60603 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone (312) 913 0625 | mail address | rsemrad@semradlaw.com |
| 6309791 | | |
| Bar number & State | | |

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| | | | | 12/29/15 6:11PM |
|----------------------|------------------------|-------------------|-------------|---------------------|
| Fill in this informa | ation to identify your | case: | | |
| Debtor 1 | Kimberly Martin | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bank | cruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | 01 1 1 1 1 1 |
| (II KIIOWII) | | | | Check if this is an |
| | | | | amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Pa | t 1: Summarize Your Assets | | |
|----|--|------------|--------------------------|
| | | Your a | ssets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 80,375.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 80,375.00 |
| Pa | t 2: Summarize Your Liabilities | | |
| | | | iabilities nt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 0.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 108,461.00 |
| | Your total liabilities | \$ | 108,461.00 |
| Pa | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 3,508.64 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 3,502.00 |
| Pa | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other s | chedules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a | a persona | I, family, or |

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

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Debtor 1 Kimberly Martin

the court with your other schedules.

3. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,244.17

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Tot | al claim |
|--|------|-----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$. | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$. | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 51,049.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 51,049.00 |

Case 15-43522 Doc 1 Filed 12/29/15 Entered 12/29/15 18:13:39 Desc Main Page 10 of 56 Document 12/29/15 6:11PM Fill in this information to identify your case and this filing: Debtor 1 Kimberly Martin Middle Name First Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Do not deduct secured claims or exemptions. Put Volvo Who has an interest in the property? Check one. Make: 3.1 the amount of any secured claims on Schedule D: S40 Creditors Who Have Claims Secured by Property. Model Debtor 1 only 2001 Year: Debtor 2 only Current value of the Current value of the 150000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another 2001 Volvo S40 with 150k miles: \$1.525.00 \$1.525.00 not currently operating ☐ Check if this is community property (see instructions) Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

No

☐ Yes

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here......>>

\$1,525.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own? Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B

Schedule A/B: Property

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Case number (if known) Document 12/29/15 6:11PM Debtor 1 Kimberly Martin Yes. Describe..... Miscellaneous household goods and furnishings \$500.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes Describe.... \$300.00 Used clothing and shoes 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$1,000.00 Diamond wedding band 13. Non-farm animals Examples: Dogs, cats, birds, horses ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,800.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

| | | Case 15-4352 | 2 Doc 1 | | Entered 12/29/15 18:13:39 | Desc Main |
|-----------------------------|-----------------|--|---|--|---|----------------------------|
| Debto | r 1 | Kimberly Martin | | Document | Page 12 of 56 Case number (if known) | 12/29/15 6:11PM |
| | Yes | | | | | |
| | | | | al accounts; certificates counts with the same ins | of deposit; shares in credit unions, brokerage stitution, list each. | houses, and other similar |
| | | | | Institution r | name: | |
| _ | 103 | | | | | |
| | | 17.1 | l. | US Bank | checking | \$0.00 |
| | | 17.2 | 2. | US Bank | savings | \$50.00 |
| 18. B c | onds, xamp | mutual funds, or publes: Bond funds, investr | licly traded sto ment accounts v | cks vith brokerage firms, mo | ney market accounts | |
| | | | Institution or i | ssuer name: | | |
| 19. No ar | on-pu nd joi | blicly traded stock an | d interests in i | ncorporated and uninc | orporated businesses, including an intere | st in an LLC, partnership, |
| = ! | | | | | | |
| | Yes. | Give specific information N | on about them lame of entity: | | % of ownership: | |
| Ν | egotia | able instruments include | e personal check | | egotiable instruments missory notes, and money orders. by signing or delivering them. | |
| | No | | | | | |
| | Yes. (| Give specific information Is | n about them ssuer name: | | | |
| | xamp | nent or pension accou les: Interests in IRA, EF | | 01(k), 403(b), thrift saving | gs accounts, or other pension or profit-sharing | g plans |
| . | Yes. I | _ist each account separ Турն | rately. e of account: | Institution r | name: nty Pension | \$77,000.00 |
| Yo E. | our sh xamp | | sits you have m | | ntinue service or use from a company ctric, gas, water), telecommunications compa | anies, or others |
| ■ ! | | | | Institution r | name or individual: | |
| | | es (A contract for a peri | iodic payment o | f money to you, either fo | r life or for a number of years) | |
| | | lssuer na | ame and descrip | tion. | | |
| 24. Int e 26 ■ | U.S.C | s in an education IRA, C. §§ 530(b)(1), 529A(b) | , in an account), and 529(b)(1). | in a qualified ABLE pro | ogram, or under a qualified state tuition pr | ogram. |
| | | Institution | n name and desc | cription. Separately file t | he records of any interests.11 U.S.C. § 521(c |): |
| | | equitable or future int | terests in prope | erty (other than anythir | ng listed in line 1), and rights or powers ex | ercisable for your benefit |
| □ , | | Give specific information | on about them | | | |
| | | | | ets, and other intellector | ual property and licensing agreements | |
| | • | | · · | · | | |

Document Page 13 of 56 12/29/15 6:11PM Case number (if known) Debtor 1 Kimberly Martin ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list No ☐ Yes. Give specific information... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$77,050.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6.

Case 15-43522

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Desc Main

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Case number (if known) Document 12/29/15 6:11PM Debtor 1 Kimberly Martin ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$1,525.00 57. Part 3: Total personal and household items, line 15 \$1,800.00 58. Part 4: Total financial assets, line 36 \$77,050.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00

\$0.00

Copy personal property total

\$80,375.00

Official Form 106A/B

Schedule A/B: Property

61. Part 7: Total other property not listed, line 54

Total personal property. Add lines 56 through 61...

Total of all property on Schedule A/B. Add line 55 + line 62

\$80,375.00

\$80,375.00

| | | Docume | nt Page 15 of 56 | 12/29/15 6:11Pf |
|----------------------|----------------------------|-------------------|------------------|------------------------------------|
| Fill in this informa | ation to identify your | case: | | |
| Debtor 1 | Kimberly Martin First Name | Middle Name | Last Name | - |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | _ |
| United States Bank | cruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | _ |
| Case number | | | | — Check if this is an |
| (<i>)</i> | | | | Check if this is an amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim Specific laws that allow exemption Check only one box for each exemption | |
|--|--|--|--|
| | Copy the value from Check only one box for each exemption. Schedule A/B | | |
| 2001 Volvo S40 150000 miles 2001 Volvo S40 with 150k miles; not | \$1,525.00 | \$1,525.00 735 ILCS 5/12-1001(c) | |
| currently operating Line from <i>Schedule A/B</i> : 3.1 | | □ 100% of fair market value, up to any applicable statutory limit | |
| Miscellaneous household goods and furnishings | \$500.00 | \$500.00 735 ILCS 5/12-1001(b) | |
| Line from Schedule A/B: 6.1 | | □ 100% of fair market value, up to any applicable statutory limit | |
| Used clothing and shoes Line from Schedule A/B: 11.1 | \$300.00 | \$300.00 735 ILCS 5/12-1001(a) | |
| | | □ 100% of fair market value, up to any applicable statutory limit | |
| Diamond wedding band Line from Schedule A/B: 12.1 | \$1,000.00 | \$1,000.00 735 ILCS 5/12-1001(b) | |
| | | □ 100% of fair market value, up to any applicable statutory limit | |
| US Bank savings Line from Schedule A/B: 17.2 | \$50.00 | \$50.00 735 ILCS 5/12-1001(b) | |
| | | ☐ 100% of fair market value, up to any applicable statutory limit | |

Case 15-43522 Doc 1 Filed 12/29/15 Entered 12/29/15 18:13:39 Desc Main Document Page 16 of 56 12/29/15 6:11PM Kimberly Martin Case number (if known) Debtor 1 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Cook County Pension 735 ILCS 5/12-1006 \$77,000.00 \$77,000.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

| | | Docume | ni Paue 17 0150 | | 12/29/15 6:11PM |
|---------------------|--------------------------|-------------------|-----------------|---|------------------------------------|
| Fill in this infor | mation to identify your | case: | | | |
| Debtor 1 | Kimberly Martin | Middle News | LastNama | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | Check if this is an amended filing |
| 1 | | | | ı | amenueu miilu |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

Page 18 of 56 Document 12/29/15 6:11PM Fill in this information to identify your case: Debtor 1 Kimberly Martin Middle Name First Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of 4.1 29,397.00 Americredit 7766 Last 4 digits of account number Nonpriority Creditor's Name Opened 5/01/15 Last Po Box 183583 When was the debt incurred? Active 10/28/15 Arlington, TX 76096 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community Student loans Is the claim subject to offset? Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes Deficiency after repossession Other. Specify 4.2 100.00 Last 4 digits of account number Nonpriority Creditor's Name

PO BOX 6416

Carol Stream, IL 60197

Number Street City State Zlp Code

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Official Form 106 E/F

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■ Unliquidated ■ Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes Automobile Other. Specify

Official Form 106 E/F

4.5

Last 4 digits of account number

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| Debtor | 1 Kimberly Martin | | Case number (if know) | | 12/29/15 6:11 |
|--------|---|--|--|----|---------------|
| | 1255 W. North Ave Chicago, IL 60622-1562 | When was the debt incurred? | | | |
| - | Number Street City State Zlp Code | As of the date you file, the claim i | | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | |
| | Debtor 1 only | | | | |
| | Debtor 2 only | | | | |
| | ☐ Debtor 1 and Debtor 2 only | | | | |
| | ☐ At least one of the debtors and another | | | | |
| | ☐ Check if this claim is for a community debt | | | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a sepa not report as priority claims | ration agreement or divorce that you did | | |
| | ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | | |
| | Yes | ■ Other. Specify Due | | | |
| 4.6 | Dept Of Ed/Navient | Last 4 digits of account number | 1129 | \$ | 4,725.00 |
| | Nonpriority Creditor's Name | East 4 digits of account number | | Ψ | |
| | Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773 | When was the debt incurred? | Opened 11/01/10 Last Active 10/31/15 | | |
| - | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | |
| | ■ Debtor 1 only □ Debtor 2 only | ☐ Unliquidated | | | |
| | _ | | | | |
| | Debtor 1 and Debtor 2 only | d claim: | | | |
| | At least one of the debtors and another | | | | |
| | Check if this claim is for a community debt | | | | |
| | Is the claim subject to offset? | Obligations arising out of a sepa not report as priority claims | | | |
| | No | ☐ Debts to pension or profit-sharin | | | |
| | Yes | ☐ Other. Specify Educa | | | |
| | | | | | |
| 4.7 | Dept Of Ed/Navient Nonpriority Creditor's Name | Last 4 digits of account number | 0126 | \$ | 1,889.00 |
| | Attn: Claims Dept Po Box 9400 | When was the debt incurred? | Opened 1/01/12 Last Active 10/31/15 | | |
| = | Wilkes Barr, PA 18773 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | |
| | Debtor 1 only | | | | |
| | ☐ Debtor 2 only | | | | |
| | ☐ Debtor 1 and Debtor 2 only | | | | |
| | ☐ At least one of the debtors and another | | | | |
| | ☐ Check if this claim is for a community debt | Student loans | | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a sepa not report as priority claims | | | |
| | No | ☐ Debts to pension or profit-sharin | | | |
| | Yes | Other. Specify | | | |
| | | Educa | tional | | |

Document Page 21 of 56 12/29/15 6:11PM Debtor 1 Kimberly Martin Case number (if know) 4.8 Dept Of Ed/Navient 0916 1,692.00 Last 4 digits of account number \$ Nonpriority Creditor's Name Attn: Claims Dept Opened 9/01/11 Last Po Box 9400 When was the debt incurred? Active 10/31/15 Wilkes Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Debtor 2 only Unliquidated ☐ Debtor 1 and Debtor 2 only ■ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Educational 4.9 Dept Of Ed/Navient 4,662.00 1129 Last 4 digits of account number Nonpriority Creditor's Name Opened 11/01/10 Last Attn: Claims Dept Po Box 9400 When was the debt incurred? Active 10/31/15 Wilkes Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Contingent Debtor 1 only Debtor 2 only Unliquidated ☐ Debtor 1 and Debtor 2 only ■ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes Other. Specify Educational

Dept Of Ed/Navient

Nonpriority Creditor's Name Attn: Claims Dept Po Box 9400

Wilkes Barr, PA 18773

Number Street City State Zlp Code

Last 4 digits of account number

When was the debt incurred?

0126

Opened 1/01/12 Last

Active 10/31/15

As of the date you file, the claim is: Check all that apply

1,155.00

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4.13 Dept Of Ed/Navient

Nonpriority Creditor's Name

☐ Yes

Last 4 digits of account number

Educational

0914

Other. Specify

\$ 4,281.00

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12/29/15 6:11PM Debtor 1 Kimberly Martin Case number (if know) Attn: Claims Dept Opened 9/01/12 Last Po Box 9400 When was the debt incurred? Active 10/31/15 Wilkes Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Contingent Debtor 1 only Unliquidated Debtor 2 only □ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes Other. Specify Educational 4.14 8,033.00 Dept Of Ed/Navient 0621 Last 4 digits of account number \$ Nonpriority Creditor's Name Opened 6/01/13 Last Attn: Claims Dept Po Box 9400 When was the debt incurred? Active 10/31/15 Wilkes Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Contingent Debtor 1 only Debtor 2 only Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes Other. Specify Educational 4.15 Dept Of Ed/Navient 3,861.00 1004 Last 4 digits of account number Nonpriority Creditor's Name Attn: Claims Dept Opened 10/01/14 Last Po Box 9400 When was the debt incurred? Active 10/31/15 Wilkes Barr, PA 18773

As of the date you file, the claim is: Check all that apply

Number Street City State Zlp Code

Case 15-43522 Doc 1 Filed 12/29/15 Entered 12/29/15 18:13:39 Desc Main Page 24 of 56 Document 12/29/15 6:11PM Debtor 1 Kimberly Martin Case number (if know) Who incurred the debt? Check one. Contingent Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify ☐ Yes Educational 4.16 Dept Of Ed/Navient 0310 3,657.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Claims Dept Opened 3/01/10 Last Po Box 9400 When was the debt incurred? Active 10/31/15 Wilkes Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Contingent Debtor 1 only ■ Unliquidated ☐ Debtor 2 only Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community Student loans Is the claim subject to offset? Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes Other. Specify Educational 4.17 5.559.00 Dept Of Ed/Navient 0621 Last 4 digits of account number Nonpriority Creditor's Name Attn: Claims Dept Opened 6/01/13 Last Po Box 9400 When was the debt incurred? Active 10/31/15 Wilkes Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community Student loans debt Is the claim subject to offset? Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes Other. Specify

4.18 Dept Of Ed/Navient

Nonpriority Creditor's Name

Last 4 digits of account number

Schedule E/F: Creditors Who Have Unsecured Claims

Educational

0310

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| Debto | or 1 Kimberly Martin | Document Page | 25 of 56 Case number (if know) | 12/29/15 6:11PM |
|-------|--|--|---|---------------------|
| | Attn: Claims Dept Po Box 9400 | When was the debt incurred? | Opened 3/01/10 Last Active 10/31/15 | |
| | Wilkes Barr, PA 18773 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community debt | Student loans | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a sepanot report as priority claims | aration agreement or divorce that you did | |
| | No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | Other. Specify | ational | |
| 4.19 | Dept Of Ed/Navient | Last 4 digits of account number | 0914 | \$ 2,872.00 |
| | Nonpriority Creditor's Name Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773 | When was the debt incurred? | Opened 9/01/12 Last Active 10/31/15 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecure | d claim: | |
| | ☐ At least one of the debtors and another☐ Check if this claim is for a community | Student loans | d didiiii. | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa | | |
| | ■ No | ☐ Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | Other. Specify | ational | |
| 4.20 | Diversified Consultant | Last 4 digits of account number | 0700 | \$ 372.00 |
| | Nonpriority Creditor's Name Dci Po Box 551268 | When was the debt incurred? | Opened 9/01/15 | |
| | Jacksonville, FL 32255 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |

Case 15-43522 Doc 1 Filed 12/29/15 Entered 12/29/15 18:13:39 Desc Main Document Page 26 of 56 12/29/15 6:11PM Case number (if know) Debtor 1 Kimberly Martin Who incurred the debt? Check one. Contingent Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Collection Attorney At T ☐ Yes Other. Specify 4.21 355.00 Fifth Third Bank 0946 Last 4 digits of account number \$ Nonpriority Creditor's Name Fifth Third Bank Bankruptcy Opened 3/01/13 Last Department, When was the debt incurred? Active 10/15/13 1830 E Paris Ave Se Grand Rapids, MI 49546 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Debtor 2 only Unliquidated ■ Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes Credit Card Other. Specify 4.22 2,865.00 Global Netwk 2165 Last 4 digits of account number Nonpriority Creditor's Name

Opened 3/11/13 Last 5320 College Blvd When was the debt incurred? Active 3/20/14 Shawnee Missio, KS 66211 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes Check Credit Or Line Of Credit Other. Specify

Schedule E/F: Creditors Who Have Unsecured Claims

5780

78.00

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12/29/15 6:11PM Debtor 1 Kimberly Martin Case number (if know) Nonpriority Creditor's Name 8231 185th St Ste 100 When was the debt incurred? Opened 6/01/10 Tinley Park, IL 60487 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Contingent Debtor 1 only ☐ Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ■ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes Collection Attorney Univ Of III - Radiology Other. Specify 4.24 145.00 Jefferson Capital Systems, LLC 3003 Last 4 digits of account number Nonpriority Creditor's Name 16 Mcleland Rd When was the debt incurred? Opened 1/01/14 Saint Cloud, MN 56303 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No Factoring Company Account Fingerhut ☐ Yes Other. Specify Freshstart 4.25 Mcsi Inc 4393 15,452.00 Last 4 digits of account number \$ Nonpriority Creditor's Name Po Box 327 When was the debt incurred? Palos Heights, IL 60463 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community Student loans Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No 01 Family Life Child Development ☐ Yes Other. Specify

Case 15-43522 Doc 1 Filed 12/29/15 Entered 12/29/15 18:13:39 Desc Main Document Page 28 of 56 12/29/15 6:11PM Debtor 1 Kimberly Martin Case number (if know) 4.26 318.00 Midnight Velvet **7550** Last 4 digits of account number Nonpriority Creditor's Name Swiss Colony Midnight Velvet Opened 8/01/12 Last 1112 7th Ave When was the debt incurred? Active 5/17/13 Monroe, WI 53566 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Contingent Debtor 1 only Debtor 2 only Unliquidated ☐ Debtor 1 and Debtor 2 only ■ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes Charge Account Other. Specify 4.27 Nicor 100.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 2020 When was the debt incurred? Aurora, IL 60507 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt

☐ Obligations arising out of a separation agreement or divorce that you did

7393

☐ Debts to pension or profit-sharing plans, and other similar debts

Due

As of the date you file, the claim is: Check all that apply

not report as priority claims

Last 4 digits of account number

When was the debt incurred?

Other. Specify

477.00

\$

Is the claim subject to offset?

No

☐ Yes

Phnx Finan

Nonpriority Creditor's Name

8902 Otis Ave Ste 103a Indianapolis, IN 46216 Number Street City State Zlp Code

4.28

Case 15-43522 Doc 1 Filed 12/29/15 Entered 12/29/15 18:13:39 Desc Main Document Page 29 of 56 12/29/15 6:11PM Case number (if know) Debtor 1 Kimberly Martin Who incurred the debt? Check one. Contingent Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts 11 Us Cellular ☐ Yes Other. Specify 4.29 350.00 Portfolio Recovery 2093 Last 4 digits of account number \$ Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? Opened 3/01/15 Po Box 41067 Norfolk, VA 23541 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Contingent Debtor 1 only ■ Debtor 2 only Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No **Factoring Company Account Comenity** ☐ Yes Other. Specify Bank 4.30 Rentdebt Automated Col 1,904.00 3414 Last 4 digits of account number Nonpriority Creditor's Name 2285 Murfreesboro Rd Ste When was the debt incurred? Opened 3/01/11 Nashville, TN 37217 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Contingent Debtor 1 only Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans

not report as priority claims

□ No
□ Debts to pension or profit-sharing plans, and other similar debts
□ Yes
□ Other. Specify
□ Collection Attorney Riverwood Apt
Homes/Waterton

4.31 Sprint
□ Last 4 digits of account number

Nonpriority Creditor's Name

Official Form 106 E/F

debt

☐ Obligations arising out of a separation agreement or divorce that you did

100.00

Is the claim subject to offset?

| P.O. Box 219554 Kansas City, MO 64121 Number Street City State Zip Code Who incurred the debt? Check one. Contingent Debtor 1 only Unliquidated | Debtor 1 K | Kimberly I | Martin | Document | Page 30 | of 5 Case n | 6 umber (if know) | | 12/29/15 6:11PM |
|--|---------------------------|----------------------------|--|---|--------------------|----------------|-----------------------|---------------------------|-------------------|
| Number Street City State Zip Code Who incurred the debt? Check one. Contingent | _ | | | When was the debt incurred? | | | | | |
| Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 and Debtor 3 only Student loans Student loans Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Student loans Debtor 1 and Debtor 3 only Debtor 1 and Debtor 4 only Debtor 1 and Debtor 3 only Debtor 1 and Debtor 4 only Debtor 4 only Debtor 5 only | | | | As of the date you file, | , the claim is: C | heck all | that apply | | |
| Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 least one of the debtors and another Debtor 5 only Student loans Student loans Debtor 6 of NoNPRIORITY unsecured claim: Debtor 6 of None of the debtors and another Debtor 7 only Debtor 7 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 9 only | Who | o incurred t | he debt? Check one. | ☐ Contingent | | | | | |
| Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Is the claim subject to offset? Debtor as priority claims No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Due Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, then list the collection agency here. If you do not have additional creditors here. If you do not have additional creditors here. If you can be not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Part 4: Add the Amounts for Each Type of Unsecured Claims. T | | Debtor 1 onl | у | – ° | | | | | |
| At least one of the debtors and another Check if this claim is for a community debt | | Debtor 2 onl | у | ☐ Unliquidated | | | | | |
| Check if this claim is for a community debt Student loans | | Debtor 1 and | d Debtor 2 only | Disputed | | | | | |
| debt Is the claim subject to offset? Obligations arising out of a separation agreement or divorce that you did not report as priority claims No | | | - · | | | | | | |
| Is the claim subject to offset? Obligations arising out of a separation agreement or divorce that you did not report as priority claims No | | | s claim is for a community | ☐ Student loans | | | | | |
| Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Part 4: Add the Amounts for Each Type of Unsecured Claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claims. 6a. Domestic support obligations 6a. Total claims 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. \$ 0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 0.00 Total Claim Total Claim | | | bject to offset? | _ ` ` | • | on agree | ment or divorce that | t you did | |
| Eart 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you have not read that you have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Last 4 digits of account number Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Part 4: Add the Amounts for Each Type of Unsecured Claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claims. 6a. Domestic support obligations 6a. Domestic support obligations 6a. Domestic support obligations 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. \$ 0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 0.00 Total Claim | | No | | Debts to pension or | profit-sharing pla | ans, and | other similar debts | | |
| 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you list the original creditors here. If you do not have additional persons to be notified for any debts in Part 1 or Part2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Last 4 digits of account number Part 4: Add the Amounts for Each Type of Unsecured Claims Last 4 digits of account number Part 4: Add the Amounts for Each Type of Unsecured Claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. 6. Total tealims from Part 1 6b. Taxes and certain other debts you owe the government 6b. \$ 0.00 6c. Claims for death or personal injury while you were intoxicated 6c. \$ 0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 0.00 Total Claim Total Claim | | Yes . | | Other. Specify | Due | | | | |
| 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you list the original creditors here. If you do not have additional persons to be notified for any debts in Part 1 or Part2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Last 4 digits of account number Part 4: Add the Amounts for Each Type of Unsecured Claims Last 4 digits of account number Part 4: Add the Amounts for Each Type of Unsecured Claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. 6. Total tealims from Part 1 6b. Taxes and certain other debts you owe the government 6b. \$ 0.00 6c. Claims for death or personal injury while you were intoxicated 6c. \$ 0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 0.00 Total Claim Total Claim | | | | | | | | | |
| trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part2 did you list the original creditor? Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Part 4: Add the Amounts for Each Type of Unsecured Claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claims. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claims. Total claims from Part 1 6a. Domestic support obligations 6a. \$ \text{Total claims} from Part 1 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. \$ \text{On00} 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. \$ \text{On00} Total Claim | Part 3: L | ist Other | s to Be Notified About a De | ebt That You Already Li | sted | | | | |
| Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claims. For Interval 1 | trying to co more than | ollect from one credite | you for a debt you owe to some or for any of the debts that you | eone else, list the original (listed in Parts 1 or 2, list th | creditor in Part | s 1 or 2, | then list the collect | ction agency here. Simila | rly, if you have |
| Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. Total claims from Part 1 6a. Domestic support obligations 6a. \$ 0.00 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. \$ 0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total. Add lines 6a through 6d. 6e. \$ 0.00 Total Claim Total Claim | Name and | Address | | On which entry in Pa | | | | | |
| Last 4 digits of account number Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. Total claims from Part 1 6a. Domestic support obligations 6a. \$ Total claim 6b. \$ 0.00 6c. Claims for death or personal injury while you were intoxicated 6c. \$ 0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total. Add lines 6a through 6d. 6e. \$ 0.00 Total Claim | -NONE- | | | Line of (Check one): | | | | , | |
| 6a. Domestic support obligations from Part 1 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total. Add lines 6a through 6d. 6f. Total. Add lines 6a through 6d. 6f. Total Claim 6f. Total claims 6f. \$ | | | | Last 4 digits of accou | | ait 2. C | DIEGILOIS WILITIN | onphonty onsecured | Cialitis |
| 6a. Domestic support obligations from Part 1 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total. Add lines 6a through 6d. 6f. Total. Add lines 6a through 6d. 6f. Total Claim 6f. Total claims 6f. \$ | Part 4: A | Add the Ar | mounts for Each Type of U | nsecured Claim | | | | | |
| Total claims from Part 1 6a. Domestic support obligations 6a. \$ 0.00 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total. Add lines 6a through 6d. Total Claim Total claim 6 a. \$ 0.00 6 c. \$ 0.00 Total Claim Total Claim | 6. Total the ar | mounts of | | | statistical repo | orting pu | urposes only. 28 U | .S.C. §159. Add the amou | nts for each type |
| Total claims from Part 1 6a. Domestic support obligations 6a. \$ 0.00 Claims for death or personal injury while you were intoxicated 6c. \$ 0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total. Add lines 6a through 6d. 6e. Total Claim Total Claim | of unsecure | ed claim. | | | | | Total alaim | | |
| from Part 1 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 0.00 6e. Total. Add lines 6a through 6d. 6e. \$ 0.00 Total Claim | | 6a. | Domestic support obligations | s | | 6a. | | 0.00 | |
| 6c. Claims for death or personal injury while you were intoxicated 6c. \$ 0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 0.00 6e. Total. Add lines 6a through 6d. 6e. \$ 0.00 Total Claim | | 6b | Taxes and certain other debt | s you owe the government | + | 6b | \$ | 0.00 | |
| 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 0.00 6e. Total. Add lines 6a through 6d. 6e. \$ 0.00 Total Claim | ii oiii i ait i | | | • | | | · | | |
| Total Claim | | 6d. | Other. Add all other priority uns | secured claims. Write that ar | mount here. | 6d. | \$ | | |
| Total Claim | | | | | | | | | |
| | | 6e. | Total. Add lines 6a through 6d. | | | 6e. | \$ | 0.00 | |
| 6f. Student loans 6f. \$ 51,049.00 | | | | | | | Total Claim | | |
| Total claims | Tatal -l-! | | Student loans | | | 6f. | \$ | 51,049.00 | |
| Total claims from Part 2 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6g. \$ 0.00 | | | | | vorce that you | 60 | ¢ | 0.00 | |
| did not report as priority claims 69. \$ 0.00 6h. Debts to pension or profit-sharing plans, and other similar debts 6h. \$ 0,00 | | 6h. | | | ilar debts | - | · | | |

6j.

Other. Add all other nonpriority unsecured claims. Write that amount here. 6i.

Total. Add lines 6f through 6i.

57,412.00

108,461.00

Document Page 31 of 56 12/29/15 6:11PM Fill in this information to identify your case: Debtor 1 Kimberly Martin First Name Middle Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|--|---|
| 2.1 Viamonte Realty 191st Pl. Lansing, IL 60438 | Written lease for \$1,300.00 per month |

Page 32 of 56 Document 12/29/15 6:11PM Fill in this information to identify your case: Debtor 1 Kimberly Martin Middle Name First Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106H **Schedule H: Your Codebtors** 12/15 Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor. No ☐ Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. ☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Name, Number, Street, City, State and ZIP Code Check all schedules that apply: 3.1 ☐ Schedule D, line Name ☐ Schedule E/F, line ☐ Schedule G, line _ Number ZIP Code Citv State 3.2 ☐ Schedule D, line Name ☐ Schedule E/F, line ☐ Schedule G, line

Street

State

Number

City

ZIP Code

Filed 12/29/15 Entered 12/29/15 18:13:39 Desc Main Case 15-43522 Doc 1 Page 33 of 56 Document

12/29/15 6:11PM

| Fill i | n this information to ident | tify your case: | | |
|--|--|--|--|---|
| Deb | tor 1 Kimb | perly Martin | | |
| | tor 2 | | | |
| Unit | ed States Bankruptcy Co | urt for the: NORTHERN DIS | STRICT OF ILLINOIS | |
| Cas | e number | | | Check if this is: |
| (| , | | | An amended filing |
| | | | | ☐ A supplement showing postpetition chapter 13 income as of the following date: |
| <u>Of</u> | ficial Form 106 | <u>81</u> | | MM / DD/ YYYY |
| 90 | badula I. Vau | | | |
| Be a | lying correct informationse. If you are separated | e as possible. If two marrie on. If you are married and n I and your spouse is not fili | ot filing jointly, and your spouse is ng with you, do not include informa | 1 and Debtor 2), both are equally responsible for iving with you, include information about your tion about your spouse. If more space is needed, |
| Be a | s complete and accurated bying correct information se. If you are separated has eparate sheet to the discourant Describe Emp | e as possible. If two marrie on. If you are married and n I and your spouse is not fili nis form. On the top of any a loyment | ot filing jointly, and your spouse is ng with you, do not include informa | iving with you, include information about your |
| Be assupptions assumed the second sec | s complete and accurated bying correct informatic se. If you are separated has separate sheet to the Describe Emp Fill in your employmer information. | e as possible. If two marrie on. If you are married and n I and your spouse is not filinis form. On the top of any a loyment | ot filling jointly, and your spouse is ng with you, do not include informated ditional pages, write your name at Debtor 1 | 1 and Debtor 2), both are equally responsible for iving with you, include information about your tion about your spouse. If more space is needed, nd case number (if known). Answer every question |
| Be assupptions assumed the second sec | s complete and accuratelying correct informationse. If you have more than out addition about addition and accurate the separate of the separate sheet to the separate sheet | e as possible. If two marrie on. If you are married and n and your spouse is not fill his form. On the top of any a loyment on the top of any and the top of any any and the top of any and the top of any and the top of any any any and the top of any any any any any and the top of any | ot filling jointly, and your spouse is ng with you, do not include informated individual pages, write your name at the policy of | 1 and Debtor 2), both are equally responsible for iving with you, include information about your tion about your spouse. If more space is needed, nd case number (if known). Answer every question Debtor 2 or non-filing spouse |
| Be assupptions assumed the second sec | s complete and accurated bying correct informationse. If you are separated has separate sheet to the Describe Employment information. If you have more than on attach a separate page information about addition employers. | e as possible. If two marrie on. If you are married and n if and your spouse is not fill his form. On the top of any a loyment on the top of any and the poblem is poblem. Employment standard on the condition of | ot filling jointly, and your spouse is ng with you, do not include informated individual pages, write your name a second second in the page of the pag | 1 and Debtor 2), both are equally responsible for iving with you, include information about your tion about your spouse. If more space is needed, nd case number (if known). Answer every question Debtor 2 or non-filing spouse |
| Be assupptions assumed the second sec | s complete and accuratelying correct informationse. If you have more than out addition about addition and accurate the separate of the separate sheet to the separate sheet | e as possible. If two marrie on. If you are married and n if and your spouse is not fill his form. On the top of any a loyment on the top of any and the poblem is poblem. Employment standard on the condition of | Debtor 1 Employed Output Description Des | 1 and Debtor 2), both are equally responsible for iving with you, include information about your tion about your spouse. If more space is needed, nd case number (if known). Answer every question Debtor 2 or non-filing spouse |
| Be assupptions assumed the second sec | s complete and accuratelying correct informationse. If you are separated has separate sheet to the separate sheet sh | e as possible. If two marrie on. If you are married and n and your spouse is not fill his form. On the top of any a loyment on the lo | Debtor 1 Employed Customer Service Rep. Cook County Hospital | 1 and Debtor 2), both are equally responsible for iving with you, include information about your tion about your spouse. If more space is needed, nd case number (if known). Answer every question Debtor 2 or non-filing spouse |

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

| | | For Debtor 1 | | For Debtor 2 or non-filing spouse | | |
|----|-----|--------------|-----|-----------------------------------|--|--|
| 2. | \$ | 4,453.58 | \$ | 0.00 | | |
| 3. | +\$ | 0.00 | +\$ | 0.00 | | |
| 4. | \$ | 4,453.58 | \$ | 0.00 | | |

Schedule I: Your Income Official Form 106I page 1

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Debtor 1 Kimberly Martin Case number (if known) For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 4.453.58 0.00 List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. 372.69 0.00 5b. Mandatory contributions for retirement plans 5b. 481.02 0.00 Voluntary contributions for retirement plans 5c. 5c. 0.00 0.00 5d. Required repayments of retirement fund loans 5d. 0.00 0.00 5e. Insurance 5e. 231.94 0.00 5f. **Domestic support obligations** 5f. \$ 0.00 0.00 5g. 5g. **Union dues** \$ \$ 49.29 0.00 5h. Other deductions. Specify: 5h.+ \$ 0.00 \$ 0.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 1,134.94 0.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 7. \$ 3,318.64 0.00 8 List all other income regularly received: Net income from rental property and from operating a business, Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. \$ 0.00 0.00 8h Interest and dividends 8b. 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent 8c. regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 8d. **Unemployment compensation** 8d. \$ 0.00 0.00 8e. **Social Security** 8e. 0.00 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. \$ \$ Specify: LINK 0.00 190.00 8g. 8g. Pension or retirement income \$ \$ 0.00 0.00 Other monthly income. Specify: 8h.+ \$ 8h. \$ 0.00 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. 0.00 \$ 190.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$ 3,318.64 \$ 190.00 \$ 3.508.64 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 3,508.64 12. applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? Nο Yes. Explain:

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| Fill | in this informa | ition to identify yo | our case: | | | | | |
|-----------|-------------------------------|---------------------------------------|---------------|--|-----------------------|-------------|-----------------------------------|---|
| Deb | tor 1 | Kimberly Mar | tin | | | Che | eck if this is: An amended filing | |
| | tor 2 | | | | | | | wing postpetition chapter |
| (Spo | ouse, if filing) | | | | | | 13 expenses as of | the following date: |
| Unit | ed States Bankr | uptcy Court for the: | NORTH | HERN DISTRICT OF ILLIN | OIS | | MM / DD / YYYY | |
| | e number nown) | | | | | | | |
| Of | fficial Fo | rm 106J | | | | | | |
| So | chedule | J: Your | Exper | ises | | | | 12/15 |
| info | ormation. If m | | eded, atta | . If two married people a ach another sheet to this n. | | | | |
| Par 1. | t 1: Descr | ribe Your House | hold | | | | | |
| | ■ No. Go to | | in a sepai | rate household? | | | | |
| | | | | | | | | |
| | _ | | st file Offic | ial Form 106J-2, <i>Expense</i> | s for Separate Hous | ehold of De | ebtor 2. | |
| 2. | Do you have | e dependents? | □ No | | | | | |
| | Do not list D and Debtor 2 | | Yes. | Fill out this information for each dependent | Dependent's relati | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □ No |
| | dependents | | | | Daughter | | 6 | Yes |
| | | | | | | | | □ No |
| | | | | | Daughter | | | ■ Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No □ Yes |
| 3. | expenses o | penses include f people other t | han <u> </u> | No Yes | | | | □ Tes |
| | yourself and | d your depende | nts? ⊔ | 165 | | | | |
| exp | imate your ex | | our bankr | uptcy filing date unless y | | | | apter 13 case to report of the form and fill in the |
| the | | h assistance an | | government assistance cluded it on Schedule I: | | | Your exp | enses |
| , | | · - ' , | | | | | | |
| 4. | | or home owners and any rent for th | | nses for your residence. I or lot. | Include first mortgag | je 4. | \$ | 1,300.00 |
| | If not include | led in line 4: | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. | \$ | 0.00 |
| | • | rty, homeowner's | | | | 4b. | \$ | 0.00 |
| | | | | upkeep expenses | | 4c. | · | 0.00 |
| 5. | | owner's associat | | dominium dues our residence, such as ho | ome equity loans | 4d. 5. | | 0.00 |
| ٥. | . wantional i | gago payiii | v. y. | | and oquity loans | ٥. | ₩ | 0.00 |

| Deb | otor 1 | Kimberly Martin | Case num | ber (if known) | |
|-----|---------------|--|----------|----------------|--------------------------|
| 6. | Utiliti | ies: | | | |
| | 6a. | Electricity, heat, natural gas | 6a. | \$ | 275.00 |
| | 6b. | Water, sewer, garbage collection | 6b. | \$ | 0.00 |
| | 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 0.00 |
| | 6d. | Other. Specify: Cable, Internet, & Landline | 6d. | \$ | 67.00 |
| | | Cell Phone | | \$ | 50.00 |
| 7. | Food | and housekeeping supplies | | \$ | 650.00 |
| 8. | Child | Icare and children's education costs | 8. | \$ | 0.00 |
| 9. | Cloth | ning, laundry, and dry cleaning | 9. | \$ | 200.00 |
| 10. | Perso | onal care products and services | 10. | \$ | 0.00 |
| | | cal and dental expenses | 11. | \$ | 200.00 |
| 12. | Trans | sportation. Include gas, maintenance, bus or train fare. | | | |
| | Do no | ot include car payments. | 12. | \$ | 600.00 |
| 13. | Enter | rtainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 0.00 |
| 14. | Char | itable contributions and religious donations | 14. | \$ | 0.00 |
| 15. | Insur | | | | |
| | | ot include insurance deducted from your pay or included in lines 4 or 20. | | • | |
| | | Life insurance | 15a. | · | 0.00 |
| | | Health insurance | 15b. | · - | 0.00 |
| | | Vehicle insurance | 15c. | · | 50.00 |
| | | Other insurance. Specify: | 15d. | \$ | 0.00 |
| 16. | Speci | s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: | 16. | \$ | 0.00 |
| 17. | | Ilment or lease payments: | | | |
| | | Car payments for Vehicle 1 | 17a. | · | 0.00 |
| | | Car payments for Vehicle 2 | 17b. | · | 0.00 |
| | | Other. Specify: | 17c. | · | 0.00 |
| | | Other. Specify: | 17d. | \$ | 0.00 |
| | dedu | payments of alimony, maintenance, and support that you did not report as cted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). | 18. | · · | 0.00 |
| 19. | | r payments you make to support others who do not live with you. | | \$ | 0.00 |
| | Spec | · | 19. | | |
| 20. | | r real property expenses not included in lines 4 or 5 of this form or on Sche | | | 0.00 |
| | | Mortgages on other property | 20a. | | 0.00 |
| | | Real estate taxes | 20b. | · | 0.00 |
| | | Property, homeowner's, or renter's insurance | 20c. | | 0.00 |
| | | Maintenance, repair, and upkeep expenses | 20d. | · | 0.00 |
| | | Homeowner's association or condominium dues | 20e. | | 0.00 |
| 21. | Othe | r: Specify: Personal Grooming | 21. | +\$ | 110.00 |
| 22. | Calcu | ulate your monthly expenses | | | |
| | | Add lines 4 through 21. | | \$ | 3,502.00 |
| | | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | 0,002.00 |
| | | Add line 22a and 22b. The result is your monthly expenses. | | \$ | 3 503 00 |
| | 226. / | Add line 22a and 22b. The result is your monthly expenses. | | Ψ | 3,502.00 |
| 23. | Calcu | ulate your monthly net income. | | - | |
| | 23a. | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 3,508.64 |
| | 23b. | Copy your monthly expenses from line 22c above. | 23b. | -\$ | 3,502.00 |
| | | | | | |
| | 23c. | Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> . | 23c. | \$ | 6.64 |
| | _ | | | | |
| 24. | For ex | ou expect an increase or decrease in your expenses within the year after you cample, do you expect to finish paying for your car loan within the year or do you expect your mo cation to the terms of your mortgage? | | | or decrease because of a |
| | | , , , | | | |
| | ■ No | | | | |
| | $\Box \lor c$ | 20 LEADISID DELE. | | | |

| Fill in this informa | ation to identify your | case: | | | | |
|--|------------------------|------------------|---------------|--|---|------|
| Debtor 1 | Kimberly Martin | | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Banl | kruptcy Court for the: | NORTHERN DISTRIC | T OF ILLINOIS | | | |
| Case number(if known) | | | | | ☐ Check if this is an amended filing | |
| Official Form | | | | 2.1.1.1 | | |
| Declaration | on About a | n Individual | Debtor's | Schedules | 1: | 2/15 |
| If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below | | | | | | |
| Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | | |
| ■ No | | | | | | |
| ☐ Yes. Na | me of person | | | . Attach Bankruptcy Pet and Signature (Official F | tition Preparer's Notice, Declarati Form 119). | ion, |
| Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. | | | | | | |

Signature of Debtor 2

Date

X /s/ Kimberly Martin

Kimberly Martin Signature of Debtor 1

Date December 29, 2015

| Fill | in this inforn | nation to identify you | r case: | | | |
|--------|---------------------------|---|--|------------------------------------|---|------------------------------------|
| Deb | otor 1 | Kimberly Martin | | | | |
| D - I | | First Name | Middle Name | Last Name | | |
| | otor 2 use if, filing) | First Name | Middle Name | Last Name | | |
| Uni | ted States Bar | nkruptcy Court for the: | NORTHERN DISTRICT C | OF ILLINOIS | | |
| Cas | se number | | | | | |
| | own) | | | | | Check if this is an |
| | | | | | | mended filing |
| ~ . | – | | | | | |
| | ficial Fo | | | | | |
| Sta | atement | of Financial | Affairs for Individ | luals Filing for B | ankruptcy | 12/15 |
| | | | | | equally responsible for sup | |
| | | ore space is needed, n). Answer every ques | | this form. On the top of an | y additional pages, write yo | ur name and case |
| iiuiii | | i). Allswel every ques | MOII. | | | |
| Par | t 1: Give D | etails About Your Ma | arital Status and Where You | Lived Before | | |
| 1. | What is your | r current marital statu | ıs? | | | |
| | ☐ Married | | | | | |
| | ■ Not mar | ried | | | | |
| _ | | | | | | |
| 2. | During the la | ast 3 years, have you | lived anywhere other than | where you live now? | | |
| | ■ No | | | | | |
| | ☐ Yes. Lis | t all of the places you l | lived in the last 3 years. Do n | ot include where you live now | V. | |
| | Debtor 1 Pr | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| 2 | Within the Is | et 8 vears did vou e | ver live with a spouse or le | nal equivalent in a commu | nity property state or territor | w? (Community proports |
| state | | | | | ico, Texas, Washington and \ | |
| | | | | | | |
| | ■ No | ako guro vou fill out Sol | hadula H. Vaur Cadabtars (O | fficial Form 106H) | | |
| | ☐ Tes. Ma | ike sure you iiii out <i>sci</i> | hedule H: Your Codebtors (O | iliciai Foitti 100H). | | |
| Par | t 2 Explai | n the Sources of You | r Income | | | |
| 4 | Did you have | a any inaoma from an | unleyment or from energic | an a huainaga during thia w | nav av tha tura praviava sala | n day waara? |
| 4. | | | nployment or from operation of the control of the c | | ear or the two previous cale -time activities. | nuar years? |
| | If you are filin | ng a joint case and you | have income that you receiv | e together, list it only once u | nder Debtor 1. | |
| | □ No | | | | | |
| | Yes. Fill | in the details. | | | | |
| | | | Dahtan 4 | | Dahtar 2 | |
| | | | Debtor 1 Sources of income | Gross income | Debtor 2 Sources of income | Gross income |
| | | | Check all that apply. | (before deductions and exclusions) | Check all that apply. | (before deductions and exclusions) |
| Fro | m Januarv 1 | of current year until | - | \$48,741.00 | □ Wagos commissions | , |
| | | d for bankruptcy: | ■ Wages, commissions, bonuses, tips | Ψ10,7 11.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |
| | | | | | _ , 3 / | |

Entered 12/29/15 18:13:39 Case 15-43522 Doc 1 Filed 12/29/15 Desc Main Document Page 39 of 56 12/29/15 6:11PM Kimberly Martin ase number (if known) Debtor 1 Debtor 1 Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$44,066.00 ☐ Wages, commissions, ■ Wages, commissions, (January 1 to December 31, 2014) bonuses, tips bonuses, tips □ Operating a business ☐ Operating a business For the calendar year before that: \$44,703.00 ■ Wages, commissions, ■ Wages, commissions, (January 1 to December 31, 2013) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Nο Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below.. (before deductions and Describe below. (before deductions exclusions) and exclusions) List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose," During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more? ☐ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to

an attorney for this bankruptcy case.

Creditor's Name and Address Dates of payment **Total amount** Amount you Was this payment for ... still owe paid

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| 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such a support and alimony. | | | | al partner; y managing agent, | | |
|---|---|-------------------------|---------------------|----------------------------------|-------------------------|----------------------------|
| | ■ No | | | | | |
| | ☐ Yes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment |
| Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt tinsider? Include payments on debts guaranteed or cosigned by an insider. | | | | ebt that benefited an | | |
| | No | | | | | |
| | Yes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for Include cred | this payment tor's name |
| Par | t 4: Identify Legal Actions, Repossession | ns, and Foreclosures | | | | |
| 9. | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title | | | on suits, paternity | | rt or custody |
| | Case number | Nature of the case | Court or agency | | Status of the | e case |
| 10. | Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo No Yes. Fill in the information below. | | erty repossessed, t | foreclosed, garnis | shed, attached | I, seized, or levied? |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the |
| | | Explain what happened | d | | | property |
| 11. | Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. | | | | amounts from your | |
| | Creditor Name and Address | Describe the action the | e creditor took | Date taken | action was | Amount |
| 12. | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a No Yes | | erty in the possess | | | efit of creditors, a |

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| Par | t 5: List Certain Gifts and Contributions | | | | | | | |
|-----|---|--------------|---|---|---|--|--|--|
| 13. | Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No | | | | | | | |
| | ☐ Yes. Fill in the details for each gift. | | | | | | | |
| | Gifts with a total value of more than \$600 per person | | Describe the gifts | Dates you gave the gifts | Value | | | |
| | Person to Whom You Gave the Gift and Address: | | | | | | | |
| 14. | Within 2 years before you filed for bankru ■ No | ptcy, | did you give any gifts or contributions with a tot | al value of more than | \$600 to any charity | | | |
| | ☐ Yes. Fill in the details for each gift or co | ntribu | ution. | | | | | |
| | Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | tal | Describe what you contributed | Dates you contributed | Value | | | |
| Par | t 6: List Certain Losses | | | | | | | |
| 15. | disaster, or gambling? ■ No □ Yes. Fill in the details. Describe the property you lost and how the loss occurred | Descr | r since you filed for bankruptcy, did you lose any ribe any insurance coverage for the loss the the amount that insurance has paid. Listing insurance claims on line 33 of Schedule A/B: party. | thing because of the Date of your loss | ft, fire, other Value of property lost | | | |
| Par | t 7: List Certain Payments or Transfers | | | | | | | |
| 16. | Within 1 year before you filed for bankrup consulted about seeking bankruptcy or produced any attorneys, bankruptcy petition produced No Yes. Fill in the details. | epar | ers, or credit counseling agencies for services require | ed in your bankruptcy. | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo | u | Description and value of any property transferred | Date payment or transfer was made | Amount of payment | | | |
| 17. | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No | | | | | | | |
| | Yes. Fill in the details. | | | | | | | |
| | Person Who Was Paid Address | | Description and value of any property transferred | Date payment or transfer was | Amount of payment | | | |

made

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Debtor 1 Kimberly Martin

| 18. | 8. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. | | | | | | | | |
|--|--|---|-------------------|-----------------------|---|-------------------------------|--|--|--|
| | ■ No | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | Person Who Received Transfer Address | Description and va property transferre | | payme | ibe any property or ents received or debts n exchange | Date transfer was made | | | |
| | Person's relationship to you | | | | 3 | | | | |
| 19. | | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a peneficiary? (These are often called asset-protection devices.) | | | | | | | |
| | ■ No | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | Name of trust | Description and va | alue of the prop | erty trans | ferred | Date Transfer was made | | | |
| Pa | tt 8: List of Certain Financial Accounts, Instru | uments, Safe Deposit | Boxes, and Sto | rage Unit | s | | | | |
| 20. | Within 1 year before you filed for bankruptcy, v | were any financial acc | ounts or instru | ments he | eld in your name, or for yo | our benefit, closed, | | | |
| | sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associa | | | | t; shares in banks, credit | unions, brokerage | | | |
| | No | tions, and other inian | ciai institutions | | | | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | _ | ast 4 digits of | Type of accour | nt or | Date account was | Last balance | | | |
| | | account number instrument | | 0. | closed, sold, moved, or transferred | before closing or transfer | | | |
| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, eash, or other valuables? | | | | | | | | |
| | ■ No | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acce Address (Number, Stre State and ZIP Code) | | Describe | the contents | Do you still have it? | | | |
| | | ŕ | | | | | | | |
| 22. | Have you stored property in a storage unit or p | place other than your I | home within 1 y | year betoi | re you filed for bankruptc | у | | | |
| | No | | | | | | | | |
| | Yes. Fill in the details. | | | | _ | _ | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or hat to it? Address (Number, Street and ZIP Code) | | Describe [·] | the contents | Do you still have it? | | | |
| Pai | t 9. Identify Property You Hold or Control for | r Samoona Elsa | | | | | | | |
| Га | t 9: Identify Property You Hold or Control for | Someone Eise | | | | | | | |
| 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. | | | | | or, or hold in trust | | | | |
| | ■ No | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the prope (Number, Street, City, Sta | | Describe | the property | Value | | | |
| | | Code) | | | | | | | |

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Debtor 1 Kimberly Martin 12/29/15 6:11PM

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.

| | to own, operato, or atmize it, including dioposts often | | | | | | | |
|-----|---|--|---------|--|-------|---|--------------------|--|
| | Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. | | | | | | | |
| Rep | ort a | II notices, releases, and proceedings the | hat y | ou know about, regardless of wher | n the | ey occurred. | | |
| 24. | Has | any governmental unit notified you the | at yo | u may be liable or potentially liable | unc | der or in violation of an environm | ental law? | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | | Governmental unit Address (Number, Street, City, State and ZIP Code) | t | Environmental law, if you know it | Date of notice | |
| 25. | Hav | re you notified any governmental unit o | f any | y release of hazardous material? | | | | |
| | | No Yes. Fill in the details. | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | | Governmental unit Address (Number, Street, City, State and ZIP Code) | t | Environmental law, if you know it | Date of notice | |
| 26. | Hav | re you been a party in any judicial or ad | mini | strative proceeding under any envi | ironi | mental law? Include settlements | and orders. | |
| | | No Yes. Fill in the details. | | | | | | |
| | | se Title se Number | | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nat | ture of the case | Status of the case | |
| Par | t 11: | Give Details About Your Business or | Cor | nnections to Any Business | | | | |
| 27. | Witl | hin 4 years before you filed for bankrup | otcy, | did you own a business or have an | ıy of | the following connections to an | y business? | |
| | | ☐ A sole proprietor or self-employed | in a | trade, profession, or other activity, | eith | er full-time or part-time | | |
| | | ☐ A member of a limited liability com | pany | y (LLC) or limited liability partnersh | ip (l | _LP) | | |
| | | ☐ A partner in a partnership | | | | | | |
| | | ☐ An officer, director, or managing e | xecu | tive of a corporation | | | | |
| | | ☐ An owner of at least 5% of the votil | ng o | r equity securities of a corporation | | | | |
| | ■ No. None of the above applies. Go to Part 12. | | | | | | | |
| | | Yes. Check all that apply above and fi | II in 1 | the details below for each business | s. | | | |
| | | siness Name dress | De | escribe the nature of the business | | Employer Identification number Do not include Social Security | | |
| | | (Number, Street, City, State and ZIP Code) | | Name of accountant or bookkeeper | | Dates business existed | | |
| | | | | | | | | |

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Case number (if known)

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Kimberly Martin Signature of Debtor 2 Kimberly Martin Signature of Debtor 1 Date December 29, 2015 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Debtor 1

Kimberly Martin

☐ Yes. Name of Person

12/29/15 6:11PM

| Fill in this information to identify your case: | | | | | | |
|---|-----------------|-------------------|-------------|--------------------------------------|--|--|
| Debtor 1 | Kimberly Martin | | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | | | |
| Case number | | | | ☐ Check if this is an amended filing | | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

| For any creditors that you listed in Part 1 of Schedule information below. | D: Creditors Who Have Claims Secured by Property (| Official Form 106D), fill in the |
|--|--|---|
| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
| Creditor's | | |
| | ☐ Surrender the property. | □ No |
| name: | Retain the property and redeem it. | |
| Description of | ☐ Retain the property and enter into a Reaffirmation Agreement. | Yes |
| property | ☐ Retain the property and [explain]: | |
| securing debt: | | |
| Creditor's | ☐ Surrender the property. | □ No |
| name: | ☐ Retain the property and redeem it. | _ |
| Description of | Retain the property and enter into a Reaffirmation Agreement. | Yes |
| property | ☐ Retain the property and [explain]: | |
| securing debt: | | |
| Creditor's | ☐ Surrender the property. | □ No |
| name: | ☐ Retain the property and redeem it. | |
| Description of | Retain the property and enter into a Reaffirmation Agreement. | Yes |
| property | ☐ Retain the property and [explain]: | |
| securing debt: | | |
| Creditor's | ☐ Surrender the property. | □ No |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| B8 (| (Form 8) (12/08) | | | Page 2 |
|------|------------------------------|--|--|--|
| | name: | | ☐ Retain the property and redeem it. | |
| | Description of | | Retain the property and enter into a Reaffirmation Agreement. | ☐ Yes |
| | property | | ☐ Retain the property and [explain]: | |
| | securing debt: | | | |
| Pa | art 2: List Your U | nexpired Personal Property | Leases | |
| in t | he information below | ow. Do not list real estate le | ou listed in Schedule G: Executory Contracts and Unexases. Unexpired leases are leases that are still in effect lease if the trustee does not assume it. 11 U.S.C. § 365 | t; the lease period has not yet ended. |
| De | escribe your unexp | ired personal property lease | es | Will the lease be assumed? |
| Le | ssor's name: | Viamonte Realty | | □ No |
| | | | | ■ Yes |
| | escription of leased operty: | Written lease for \$1,300. | 00 per month | |
| Pa | art 3: Sign Below | | | |
| | | ıry, I declare that I have indi ct to an unexpired lease. | cated my intention about any property of my estate tha | at secures a debt and any personal |
| X | | | X Signature of Debtor 2 | |
| | Kimberly Martin | | Signature of Debtor 2 | |
| | Signature of Debt | Or 1 | | |
| | Date Decem | nber 29, 2015 | Date | |
| | | | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | | Liquidation | |
|------------|----|--------------------|--|
| \$24 | 5 | filing fee | |
| \$75 | 5 | administrative fee | |
| + \$15 | 5_ | trustee surcharge | |
| \$33 | 5 | total fee | |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations:

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

12/29/15 6:11PM

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 15-43522 Doc 1 Filed 12/29/15 Entered 12/29/15 18:13:39 Desc Main

B2030 (Form 2030) (12/15)

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United States Bankruptcy Court Northern District of Illinois

| In 1 | re Kimberly Martin | | Case No. | | | |
|------|--|---|--------------------|------------------------------------|--|--|
| | | Debtor(s) | Chapter | 7 | | |
| | DISCLOSURE OF COM | IPENSATION OF ATTORN | EY FOR DE | EBTOR(S) | | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P compensation paid to me within one year before the rendered on behalf of the debtor(s) in contemple | ne filing of the petition in bankruptcy, or | agreed to be paid | to me, for services rendered or to | | |
| | For legal services, I have agreed to accept | | \$ | 1,400.00 | | |
| | Prior to the filing of this statement I have reco | eived | \$ | 0.00 | | |
| | Balance Due | | \$ | 1,400.00 | | |
| 2. | The source of the compensation paid to me was: | | | | | |
| | ■ Debtor □ Other (specify): | | | | | |
| 3. | The source of compensation to be paid to me is: | | | | | |
| | ■ Debtor □ Other (specify): | | | | | |
| 4. | ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. | | | | | |
| | ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. | | | | | |
| 5. | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: | | | | | |
| | a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] | | | | | |
| 6. | By agreement with the debtor(s), the above-disclosure of the second seco | sed fee does not include the following se | rvice: | | | |
| | | CERTIFICATION | | | | |
| this | I certify that the foregoing is a complete statement bankruptcy proceeding. | of any agreement or arrangement for page | yment to me for re | epresentation of the debtor(s) in | | |
| | December 29, 2015 | /s/ Alexander P. Nohi | r | | | |
| | Date | Alexander P. Nohr 63 | 309791 | | | |
| | | Signature of Attorney THE SEMRAD LAW | FIRM. LLC | | | |
| | | 20 S. Clark Street | | | | |
| | | 28th Floor | | | | |
| | | Chicago, IL 60603 (312) 913 0625 Fax | : (312) 913 0631 | | | |

rsemrad@semradlaw.com

Name of law firm

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1,400.00 attorney fees plus any necessary postpetition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$30.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 1. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

Initial: ______

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the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee of to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Client _____ Client ____

Kimberly Martin Matter Number 316726-001

Date: 11/25/2015

Initial: _____

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12/29/15 6:11PM

United States Bankruptcy Court Northern District of Illinois

| Northern District of Illinois | | | | | | | | |
|-------------------------------|--|---|----------------------------|----------------|--|--|--|--|
| In re | Kimberly Martin | Dalacar(s) | Case No. | | | | | |
| | | Debtor(s) | Chapter 7 | | | | | |
| | VE | RIFICATION OF CREDITOR M | ATRIX | | | | | |
| | | Number of | Creditors: | 31 | | | | |
| | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of credite | ors is true and correct to | the best of my | | | | |
| Date: | December 29, 2015 | /s/ Kimberly Martin Kimberly Martin Signature of Debtor | | | | | | |

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Po Box 183583
Arlington, TX 76096

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Grand Rapids, MI 49546

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PO BOX 6416
Carol Stream, IL 60197

Dept Of Ed/Navient
Attn: Claims Dept
Po Box 9400
Wilkes Barr, PA 18773

Global Netwk
5320 College Blvd
Shawnee Missio, KS 66211

Cach Llc/Square Two FinancialDept Of Ed/Navient
Attention: Bankruptcy
Attn: Claims Dept
Box 9400
Tinley Park, IL 60487 Denver, CO 80237 Wilkes Barr, PA 18773

Chase Auto Finance Dept Of Ed/Navient Jefferson Capital SystemL National Bankruptcy Dept Attn: Claims Dept 16 Mcleland Rd Po Box 29506 Po Box 9400 Saint Cloud, MN 56303 Phoenix, AZ 85038 Wilkes Barr, PA 18773

Comcast
1255 W. North Ave
Chicago, IL 60622-1562

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Palos Heights, IL 60463
Wilkes Barr, PA 18773

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Wilkes Barr, PA 18773 Wilkes Barr, PA 18773

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Indianapolis, IN 46216 Indianapolis, IN 46216

Dept Of Ed/Navient Dept Of Ed/Navient Portfolio Recovery Attn: Claims Dept Attn: Claims Dept Attn: Bankruptcy Po Box 9400 Po Box 9400 Po Box 41067 Wilkes Barr, PA 18773 Wilkes Barr, PA 18773 Norfolk, VA 23541

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